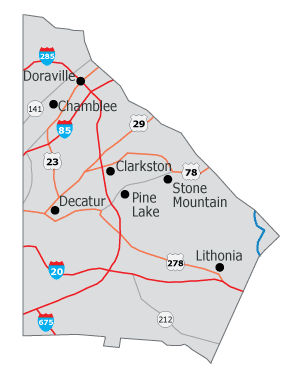
**South DeKalb Improvement Association**



**Membership Application Form**

LAST NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FIRST:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_M.I.\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTHDAY:\_\_\_/\_\_\_/\_\_\_\_ TELEPHONE: (H/W/M) (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF MEMBERSHIP: PLEASE CHECK ONE. [ ] NEW MEMBER\* [ ] RENEWAL

NEW MEMBER REFERRED BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FEES: INDIVIDUAL ($10) HOA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_NO HOA ($20)\_\_\_\_\_\_\_

HOA MEMBERSHIP <50 ($100) >50 ($150) **HOA must be a member to get reduced fees.**

*Please make checks payable to:* ***South DeKalb Improvement Association****, and mail with this application form to:* ***SDIA, P.O. Box 361050, Decatur, GA 30034***

***AREAS OF INTEREST:***

BUSINESS MEMBERSHIP $50

Company/Business Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Service\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PLEASE CHECK ONE***

|  |  |
| --- | --- |
| **[ ]** | ***HOUSING*** |
| **[ ]** | ***CODE ENFORCEMENT*** |
| **[ ]** | ***EDUCATION*** |
| **[ ]** | ***ECONOMIC DEVELOPMENT*** |
| **[ ]** | ***SAFETY*** |
| **[ ]** | ***MEMBERSHIP*** |
| **[ ]** | ***FUND RAISING*** |
| **[ ]** | ***NEWSLETTER*** |
| **[ ]** | ***HEALTH*** |
| **[ ]** | ***SPECIAL PROJECTS*** |

Date Approved:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Accepted:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Paid: $\_\_\_\_\_\_\_\_